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# **KARNATAKA STATE ESSENTIAL DRUGS LIST FOR PRIMARY HEALTH CARE**

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**1<sup>st</sup> EDITION - 2001**

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**Rational Use of Drugs Programme**

**A W H O - India Initiative**

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## FOREWORD

# KARNATAKA STATE ESSENTIAL DRUGS LIST FOR PRIMARY HEALTH CARE

Karnataka State Pharmacy Council, Bangalore, for taking

the initiative under its Rational Use of Drugs programme under

the guidance and active participation of Dr. K. R. Rao, M.A., M.B.B.S.,

Consultant of Drugs, Bangalore, 560 001, India.

Rational Use of Drugs Programme of  
Karnataka State Pharmacy Council under  
India - WHO Essential Drugs Programme and  
Delhi Society for Promotion of  
Rational Use of Drugs

**December - 2001**

## Karnataka State Essential Drugs List for Primary Health Care

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We invite comments from readers to improve quality and usefulness of this book, which may be incorporated while preparing the next edition. Comments must be structured in a format given at the end of the book.

PHC-100  
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## **FOREWORD**

The Task Force, Health and Family Welfare Services, Govt. of Karnataka had made recommendations to the government regarding Rational use of drugs. One of the major recommendation was the need for Essential Drugs List and Standard Treatment Guidelines for the state.

Karnataka State Pharmacy Council deserves kudos for taking the initiative under its Rational Use of Drugs programme under the guidance and active support of Delhi Society for Promotion of Rational Use of Drugs.

It is thus highly gratifying to announce and introduce the Standard Treatment Guidelines and Essential Drugs List for field testing. This is an important milestone in pursuance of the objectives of the Drug Policy and Essential Drugs Programme. These documents are neither restrictive nor prescriptive. They are enabling and facilitative and set a firm basis towards the attainment of equity in health care, developing rational use by all prescribers and patients, cultivating all inclusive accountability and cost consciousness.

I appreciate the sincere efforts of the Editorial Committee in bringing this out.



**Dr. H. Sudharshan**

**Chairman,**

**Task Force on Health and Family Welfare  
Govt. of Karnataka**



## Karnataka State Essential Drugs List

### Compiled by Drugs & Therapeutics Committee

**Chairman** : Dr. H. Sudarshan

**Convenor** : Dr. C.M. Francis

**Co-ordinator** : Ms. C. Sunitha Srinivas

#### **Committee Members**

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Dr. Ananth Kamath – Urology

## **Contributors**

Dr. Ramesh S. Bilimarga Dr. Leela Bhagawan

Dr. Lakshman Dr. Kodandaram

Dr. Prabhakar Murthy Dr. M. Govindaraj

Dr. Prabha S. Chandra Prof. H.J. Hrishikeshavan

Dr. Prafull Thumati Dr. B.N. Dhanyakumar

Dr. T. Prabhu Dr. Venkatesh Krishnamurthy

Dr. N.T. Venkateshaiah Dr. Pramod

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Dr. Prakash C. Rao Dr. V.S. Sridharan

Dr. K. Ramdev Dr. H.V. Ramprakash

Dr. B.C. Rao Dr. Maiya

## PREFACE

Due to the initiative of Delhi Society for Promotion of Rational Use of Drugs, Karnataka State Pharmacy Council launched a similar programme. One of the major steps identified by the group was to prepare an Essential Drugs List.

### ACKNOWLEDGEMENTS

It has been possible to prepare this only due to the guidance and support received from Dr. Ranjit Roy Chaudhury, President, Delhi Society for Promotion of Rational Use of Drugs and his team.

We sincerely acknowledge the efforts of Dr. Urmila M. Thatte, Associate Professor, Department of Clinical Pharmacology, TNMC & BYL Nair Ch. Hospital, Mumbai, in providing technical guidance and inputs. We also acknowledge guidance of Dr. Usha Gupta, Professor of Pharmacology, Maulana Azad Medical College, New Delhi.

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We would also like to acknowledge the EDL of WHO, Rajasthan state & Mumbai which have been used as reference materials.

The programme would like to acknowledge the financial and technical contribution of the India - WHO Essential Drugs Programme.



## PREFACE

Due to the initiative of Delhi Society for Promotion of Rational Use of Drugs, Karnataka State Pharmacy Council launched a similar programme. One of the important steps identified for this purpose was to prepare an Essential Drugs List for Karnataka.

Essential Drugs List was first prepared as an individual exercise from a consolidated list of Essential Drugs List of WHO and various states in India.

Eventually, after the work was initiated to prepare the Standard Treatment Guidelines, the Essential Drugs List was finally prepared on the basis of the drugs featuring in the treatment guidelines.

The Essential Drugs List implies that drugs included in it are adequate to meet the common contemporary health needs of the general population and health administrators should ensure abundant availability of such drugs in the State.

The exclusion of any drugs in the State List which is currently available and recommended by physicians does not imply that they are less effective or unsuitable for the patients. Their exclusion may have been influenced by one or more of the following factors : cost-benefit ratio, indicated in the treatment of diseases not considered significant in the State context, insufficient experience with the drug in India.

The State List is not intended as an imposition on the rights of Government institutions or private healthcare providers. It is meant to be used as a guideline to the concept of rational therapeutics and as an indicator of availability in the country. The drugs selected are considered adequate to treat diseases common to most parts of the state.

The list is intended to be a dynamic document, subject to change, with addition and/or deletion, as medical knowledge advances and new drugs become available at remunerative price. The list uses generic names for scientific clarity.

For convenience and easy comparison, the same category numbers and headings have been used as in the WHO Model List.



## THE ESSENTIAL DRUGS CONCEPT

Effective health care requires a judicious balance of preventive and curative services. A crucial and often deficient element in curative services is an adequate supply of appropriate medicines. The health objectives of the Drug Policy is

- To ensure the availability and accessibility of essential drugs to all citizens
- To ensure the safety, efficacy and quality of drugs
- To ensure good prescribing and dispensing practice
- To promote the rational use of drugs by prescribers, dispensers and patients through provision of the necessary training, education and information
- To promote the concept of individual responsibility for health, preventive care and informed decision making

Achieving these objectives requires a comprehensive strategy that not only includes improved supply and distribution, but also appropriate and extensive human resource development.

The **criteria** for the selection of essential drugs for primary, secondary and tertiary hospital care is based on the WHO guidelines for drawing up an EDL. They include the following points:

- Any drug included must meet the needs of the majority of the population
- Sufficient proven scientific data regarding effectiveness must be available
- Any drug included in the EDL should have substantial safety and benefit/ risk ratio
- All products must be of an acceptable quality, and must be tested on a continuous basis
- The aim, as a rule, is to include only products containing single pharmacologically active ingredients

- Combination products, as an exception, will be included where patient compliance becomes an important factor, or two pharmacologically active ingredients are synergistically active in a product
- Products will be listed according to their generic names only
- Where drugs are clinically equally effective, the drugs will be compared on the following factors:
  - ★ The best cost advantage
  - ★ The best researched
  - ★ The best pharmacokinetic properties
  - ★ The best patient compliance

A request for a new product to be included on the EDL must be supported by scientific evidence-based data and appropriate references on its advantages and benefits over an existing product.

Essential drugs are those that satisfy the needs of the majority of the population.

They should therefore be available at all times, in adequate amounts, and in the appropriate dosage forms

# **ESSENTIAL DRUGS LIST FOR PRIMARY HEALTH CARE**

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# ESSENTIAL DRUGS LIST FOR PRIMARY HEALTH CARE

DRUG	ROUTE OF ADMINISTRATION DOSAGE FORMS AND STRENGTHS
<b>1. ANAESTHETICS</b>	
<b>1.1 Local Anaesthetics</b>	
Lidocaine	Injection 2%
<b>1.2 Medication for Sedation for Short Term Procedures</b>	
Atropine Sulfate	Injection 1 mg/mL
Diazepam	Tablet 5 mg
	Injection 5 mg/mL
Oxygen	Inhalation
<b>2. ANALGESICS, ANTIPYRETICS &amp; NSAIDS</b>	
<b>2.1 Non - Opioid Analgesics</b>	
Acetylsalicylic Acid	Tablet 100 mg, 300 mg
Ibuprofen	Tablet 200 mg, 400 mg
Paracetamol	Tablet 500 mg
	Syrup 125 mg/5mL
Diclofenac	Tablet 50 mg
	Injection 25 mg/mL
<b>3. ANTI ALLERGIC</b>	
Chlorpheniramine Maleate	Tablet 4 mg
	Injection 10 mg/mL
Dexamethasone Sodium Phosphate	Tablet 0.5 mg
	Injection 4 mg/mL
Epinephrine Hydrochloride	Injection 1 mg/mL
Cetirizine	Tablet 10 mg

## 4. ANTIDOTES AND OTHER SUBSTANCES USED IN POISONING

### 4.1 Non Specific

Charcoal, Activated	Powder
Atropine Sulphate	Injection 600 mcg/mL

### 4.2 Specific

Anti Snake Venom	Injection, Polyclonal
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## 5. ANTICONVULSANTS / ANTI EPILEPTICS

Phenobarbital	Tablet 30 mg, 60 mg
Phenytoin Sodium	Tablet 50 mg, 100 mg
	Injection 50 mg/mL

## 6. ANTIINFECTIVES - INTESTINAL ANTHELMINTHICS

### 6.1 Intestinal Anthelmintics

Albendazole	Tablet 400 mg
	Suspension 200 mg/mL

#### 6.1.1 Antifilarials

Diethyl Carbamazine	Tablet 50 mg
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### 6.2 Antibacterial Drugs

#### 6.2.1 Penicillins

Amoxycillin	Powder for Suspension 125 mg/5 mL Capsule 250 mg; 500 mg
Benzathine Penicillin	Injection 450 mg
Benzyl Penicillin	Powder for Injection 5 Lac units, 10 Lac units

#### 6.2.2 Other Antibacterial

Chloramphenicol	Capsule 250 mg
Ciprofloxacin Hydrochloride	Tablet 250 mg, 500 mg
Cotrimoxazole (Trimethoprim + Sulphamethoxazole)	Tablet 80 mg + 400 mg

Erythromycin	Tablet 250 mg Syrup 125 mg/5 mL
Tetracycline	Capsules / Tablet 250 mg Capsules / Tablet 500 mg

### 6.2.3 Anti Leprosy Drugs

Clofazimine	Capsule 50 mg, 100 mg
Dapsone	Tablet 50 mg, 100 mg
Rifampicin	Capsule 150 mg, 300 mg

### 6.2.4 Anti Tuberculosis Drugs

Ethambutol Hydrochloride	Tablet 200 mg, 400 mg, 800 mg
Isoniazid	Tablet 100 mg, 300 mg
Pyrazinamide	Tablet 250 mg, 500 mg, 750 mg
Rifampicin	Capsule 450 mg
Streptomycin Sulphate	Powder for Injection 0.75 g, 1g

### 6.3 Anti-Malarial Drugs

Chloroquine Phosphate	Tablet 250 mg
Chloroquine Hydrochloride	Injection 40 mg/mL
Primaquine Phosphate	Tablet 2.5 mg, 7.5 mg
Quinine	Tablet 300 mg
Sulfadoxine + Pyrimethamine	Tablet 500 + 25 mg

## 7. ANTIMIGRAINE DRUGS

### 7.1 For Treatment of Acute Attack

Acetyl Salicylic Acid	Tablet 300 mg
Paracetamol	Tablet 500 mg

## 8. ANTIPARKINSON DRUGS

Levodopa + Carbidopa	Tablet 100 mg + 10 mg, 250 mg + 25 mg
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## 9. DRUGS AFFECTING THE BLOOD

### 9.1 Antianaemia Drugs

Ferrous Salt	Tablet $\geq$ 60 mg elemental iron Oral Solution 25 mg iron/mL
Folic Acid	Tablet 1 mg, 5 mg
Iron Folic Acid (Large)	Tablet 200 mg + 5 mg
Ferrous Sulfate + Folic Acid	
Iron folic Acid (small)	Tablet 67mg + 0.1 mg
Ferrous Sulfate + Folic Acid	
Iron Dextran	Injection 50 mg elemental iron/mL
Cyanocobalamin	Injection 1mg/mL

## 10. CARDIOVASCULAR DRUGS

### 10.1 Antianginal Drugs

Glyceryl Trinitrate	Tablet (Sub lingual) 500 mcg
Propranolol	Tablet 10 mg, 40 mg
	Injection 1 mg/mL

### 10.2 Antihypertensive Drugs

Atenolol	Tablet 50 mg, 100 mg
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### 10.3 Cardiac Glycosides

Digoxin	Tablet 250 mcg
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## 11. DERMATOLOGICAL DRUGS

### 11.1 Antifungal

Benzoic Acid + Salicylic Acid	Ointment/Cream 6% + 3%
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### 11.2 Anti-Infective

Methylrosanilinium Chloride (Gentian Violet)	Crystals
Povidone Iodine	Solution / Ointment 5%, 10%
Framycetin Sulfate	Cream 1%
Silver Sulfadiazine	Cream 1%

**11.3 Antiinflammatory & Antipruritics**

Calamine	Lotion
Zinc Oxide	Cream

**11.4 Keratoplastic & Keratolytics**

Glycerine	Solution
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**11.5 Scabicides And Pediculicides**

Benzyl Benzoate	Lotion 25%
Gamma Benzene	Lotion 1%
Hexa Chloride	

**12. DISINFECTANTS AND ANTISEPTICS****12.1 Antiseptics**

Hydrogen Peroxide	Solution 6%
Benzoin Compound	Tincture
Potassium Permanganate	Crystals

**12.2 Disinfectants**

Bleaching Powder	Powder
Formaldehyde	Solution

**13. DIURETICS**

Frusemide	Tablet 40 mg
	Injection 10 mg/mL

**14. GASTROINTESTINAL DRUGS****14.1 Antacids And Other Antiulcer Drugs**

Aluminum Hydroxide	Suspension
+ Magnesium Hydroxide	

Ranitidine	Tablet 150 mg
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**14.2 Antiemetic Drugs**

Prochlorperazine	Tablet 5 mg, 25 mg
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### **14.3 Anti Haemorrhoidal**

Local anaesthetic, astringent and anti inflammatory drug  
(Eg: Lidocaine/Cincocaine + Hydrocortisone)

Ointment/ Suppository

### **14.4 Antispasmodic Drugs**

Dicyclomine Hydrochloride

Tablet 10 mg

Injection 10 mg/mL

### **14.5 Cathartics**

Bisacodyl

Tablet 5 mg

Ispaghula

Husk

### **14.6 Drugs Used In Diarrhoea**

Furazolidone

Tablet 100 mg

Suspension 25 mg/5 mL

Oral Rehydration Salts

Powder

## **15. HOMONES, OTHER ENDOCRINE DRUGS AND CONTRACEPTIVES**

### **15.1 Contraceptives**

Condoms with/without spermicide

Copper containing devices

Ethinyl Estradiol + Norgestrel

Tablet 0.03 mg + 0.3 mg

### **15.2 Insulins And Anti Diabetic Agents**

Glibenclamide

Tablet 2.5 mg, 5 mg

Metformin

Tablet 500 mg

Insulin Injection (soluble)

Injection 40 IU/mL in 10 mL vial,  
100 IU/mL in 10 mL vial

Lente Insulin

Injection 40 IU/mL in 10 mL vial,  
100 IU/mL in 10 mL vial

## 16. IMMUNOLOGICALS

### 16.1 Diagnositc Agents

Tuberculin Purified Protein  
Derivative-PPD

Injection

### 16.2 Immunoglobulins

Rabies Immunoglobulin

Injection 150 IU/mL

### 16.3 Vaccines

BCG

Injection

DPT

Injection

Measles

Injection

Polimyelitis (live attenuated)

Oral Solution

Rabies

Injection

Tetanus Toxoid

Injection

Typhoid

Injection

## 17. OPHTHALMOLOGICAL PREPARATIONS

### 17.1 Anti Infective Agents

Chloramphenicol

Drops/Ointment 0.5%, 1%

Applicap 1%

Natamycin

Drops 5%

Sulfacetamide

Drops 10%, 20%, 30%

Tetracycline

Ointment 1%

Gentamicin

Drops 0.3%

### 17.2 Anti-Inflammatory Drugs

Prednisolone

Drops 0.5%

Xylometazoline

Drops 0.05%, 0.1%

### 17.3 Local Anaesthetics

Paracaine

Drops 0.5%

### 17.4 Mydriatics

Atropine

Ointment / Drops 0.5%, 1%

## 17.5 Miscellaneous

## **18. OXYTOCICS AND ANTIOXYTOCICS**

## 18.1 Oxytocics

Methyl Ergometrine Maleate                                   Tablet 0.125 mg

## 19. PSYCHOTHERAPEUTIC DRUGS

**Chlorpromazine** **Tablet 50 mg. 100 mg.**

Injection 25 mg/mL

Imipramine Tablet 75 mg

## **20. DRUGS ACTING ON THE RESPIRATORY TRACT**

## 20.1 Anti Asthmatics

Aminophylline Tablet 100 mg

Injection 25 mg/ml

**Etophylline + Theophylline**      Tablet 77 + 23 mg

Injection 169.4 mg + 50.6 mg

Salbutamol Tablet 2 mg. 4 mg.

Injection 500 mcg/mL

Syrup 2 mg/5 mL

Syrup 2 mg/5 mL

## 20.2 Antitussives

**Bromhexine Hydrochloride** Syrup 4 mg/5 ml

## 21. SOLUTION CORRECTING WATER, ELECTROLYTE AND ACID BASE DISTURBANCES

21.1 Oral

## Oral Rehydration Salts Powder

## 21.2 Parenteral

Dextrose + Sodium Chloride	Injection 5% + 0.9%
Ringer Lactate	Injection
Sodium Chloride	Injection 0.9%

### 21.3 Miscellaneous

Water for Injection	Injection 2 mL amp, 5 mL amp, 10 mL amp
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## 22. VITAMINS AND MINERALS

Ascorbic acid	Tablet 100 mg
Nicotinamide	Tablet 50 mg
Pyridoxine	Tablet 5 mg
Retinol Palmitate	Powder /Solution 5000 IU, 10000 IU
Riboflavin	Tablet 5 mg
Thiamine Hydrochloride	Tablet 5 mg, 10 mg, 50 mg Injection 100 mg
Vitamin D	Capsule 400 IU
Calcium Gluconate	Tablet 500 mg

## 23. DRUGS USED IN ENT DISEASE

Ciprofloxacin	Ear drops 3 mg/mL
Clotrimazole	Ear drops 1%
Boric Acid with Spirit	Drops
Olive Oil	



## MOTIVATION TO AMEND THE ESSENTIAL DRUGS LIST

PLEASE INDICATE THE NATURE OF SUBMISSION BY MARKING THE APPROPRIATE BOX

- Deletion of a listed drug** (Please attach proven evidence of the harmful/useless effects of the drug.)
- Addition of a new drug** (Please attach evidence of the proven benefits of this drug.)
- Replacement of a listed drug** (Please attach evidence of the proven benefits of such a replacement over the existing drug.)

Name of drug (INN) / generic

Dosage form and strength

Therapeutic class

Reason for amendment

References

Advantages over existing drug(s) in the same therapeutic class

Supporting comparison of newly recommended drug(s) with similar drugs already available under the specified category in respect of efficacy, safety, suitability and cost effectiveness.

Drug	Efficacy	Safety	Suitability	Cost Effectiveness
Proposed Drug				
Drugs Available in existing EDL				

**Efficacy** : This column should summarize potential pharmacological actions duly supported by data on pharmacodynamics and pharmacokinetics.

**Safety** : This column should summarize possible side effects. If possible, the incidence of frequent side effects and safety margins should be listed.

**Suitability** : Based on patient related conditions and contraindications. A convenient dosage form or schedule which may have a strong impact on patient adherence to treatment.

**Cost Effectiveness** : Total cost of the treatment rather than cost per unit should be the guiding factor.

Submitted by :

Address :

Contact person : Telephone number :

Signature : Date :

**Please send to:**

Rational Use of Drugs Programme  
Karnataka State Pharmacy Council  
No. 514/E, 1st Main, 2nd Stage  
Vijayanagar Club Road, Vijayanagar  
Bangalore - 560 040  
Fax : 080-3202345

Drug	Drug Approval	Effectiveness	Safety	Side Effects	Suppliers	Cost

.019



